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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator John H. Hendrix		8. Farm or Lease Name J. L. Greenwood
3. Address of Operator 403 Wall Towers West, Midland, Texas 79701		9. Well No. 17
4. Location of Well UNIT LETTER P , 990 FEET FROM THE south LINE AND 330 FEET FROM THE east LINE, SECTION 9 TOWNSHIP 22-S RANGE 37-E NMPM.		10. Field and Pool, or Wildcat Drinkard
15. Elevation (Show whether DF, RT, GR, etc.) 3427' GL		12. County Lea

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

1. Ran 200 jts. 5-1/2" 17.7# ST&C & LT&C casing set @ 6600'.
2. Cemented w/310 sx. Halliburton "Lite" and 355 sx. Halliburton Class "C" Poz-Mix, 2% gel and 8# salt.
3. Plug down @ 4:00 a.m. MST 12-15-73. Found cement top @ 2800'.
4. WOC 18 hrs. Tested casing to 1000#.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Margaret D. Jones TITLE Production Clerk DATE 12-17-73

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: